04/19/2006 10:55

Image# 26940093578

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example:If typing, type COMMITTEE (in full) OR TYPE OR PRINT ₩ over the lines American Hospital Association PAC 325 Seventh Street, NW ADDRESS (number and street) Suite 700 Check if different than previously Washington DC 20004 reported. (ACC) FEC IDENTIFICATION NUMBER STATE. ZIPCODE 🛋 CITY A IS THIS NEW **AMENDED** C00106146 Х REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Χ Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) (c) 12-Day Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Post -Election General (30G) Runoff (30R) Special (30S) Report for the: **Termination Report** (TER) in the Election on State of 03 0 1 2006 03 3 1 2006 Covering Period through I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Ms. Melinda Hatton Type or Print Name of Treasurer Electronically Filed by Ms. Melinda Hatton 04 19 2006 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 02/2003) Only

Image# 26940093579

FEC Form 3X (Rev. 02/2003)

SUMMARY PAGE OF RECEIPTS AND DISRUBSEMENTS

OF RECEIPTS AND DISBURSEMENTS Page 2

F	Report Covering the Period: From:	01 2006	To: 0 3 3 1 2 0 0 6
	_	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1 Y2006		941820.56
	(b) Cash on Hand at Begining of Reporting Period	947067.54	
	(c) Total Receipts (from Line 19)	49923.08	199847.65
	(d) Subtotal (add lines 6(b) and		
	6(c) for Column A and Lines 6(a) and 6(c) for Column B)	996990.62	1141668.21
7.	Total Disbursements (from Line 31)	155399.89	300077.48
3.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	841590.73	841590.73
9.	Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003) Page 3

Write or Type Committee Name
American Hospital Association PAC

Report Covering the Period:

М М

From:

01

2006

. 0 3 M

^D 3 1

2006

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Contributions (other than loans) From: (a) Individuals/Persons Other		
Than Political Committees (i) Itemized (use Schedule A)	22818.77	47546.47
(ii) Unitemized	7586.54	23147.11
(iii) TOTAL (add Lines 11(a)(i) and (ii)	30405.31	70693.58
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)(d) Total Contributions (add Lines	1666.00	6666.00
11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	32071.31	77359.58
Transfers From Affiliated/Other Party Committees	17500.00	121500.00
3. All Loans Received	0.00	0.00
Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
to Federal candidates and Other Political Committees	0.00	0.00
7. Other Federal Receipts (Dividends, Interest, etc.)	351.77	988.07
8. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
9. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	49923.08	199847.65
0. Total Federal Receipts (subtract Line 18(c) from Line 19)	49923.08	199847.65

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) Page 4

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
1.	Operating Expenditures: (a) Shared Federal/Non-Federal		
	Activity (from Schedule H4)	0.00	0.00
	(i) Federal Share	0.00	0.00
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating	1000.00	1507.40
	Expenditures	1099.89	1527.48
	(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))	1099.89	1527.48
2.	Transfers to Affiliated/Other Party		
	Committees	0.00	0.00
	Contributions to Federal Candidates/Committeesand Other Political Committees	154300.00	298550.00
	Independent Expenditure	0.00	0.00
	(use Schedule E) Coordinated Expenditures Made by Party	0.00	0.00
	Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
	(use serieudie i)		
.	Loan Repayments Made	0.00	0.00
		2.22	
	Loans Made Refunds of Contributions To:	0.00	0.00
,.	(a) Individuals/Persons Other	0.00	0.00
	Than Political Committees	5.00	0.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees	0.00	0.00
	(such as PACs)	0.00	0.00
	(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
	(add Lines 20(a), (b), and (c))		
).	Other Disbursements	0.00	0.00
).	Federal Election Activity (2 U.S.C 431(20))		
	(a) Shared Federal Election Activity		
	(from Schedule H6)	0.00	0.00
	(i) Federal Share	0.00	0.00
	(ii) "Levin" Share	0.00	0.00
	(b) Federal Election Activity Paid Entirely	0.00	0.00
	With Federal Funds	0.00	0.00
	(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	155399.89	300077.48
2.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) from Line 30(a)(ii)		
		155399.89	300077.48

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	32071.31	77359.58
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
85. Net Contributions (other than loans) (subtract Line 34 from Line 33)	32071.31	77359.58
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	1099.89	1527.48
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
88. Net Operating Expenditures (subtract Line 37 from Line 36)	1099.89	1527.48

SCHEDULE A (FEC Form 3X)				FOR LINE NUMBER: PAGE 6 / 66
	•		Use separate schedule(s) or each category of the	(check only one)
11	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
Ar or	ny information copied from such Reports and Sta for commercial purposes, other than using the n	itements may ame and add	not be sold or used by any persol dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
abla	NAME OF COMMITTEE (In Full)			
\rangle	American Hospital Association PAC			
Α.	Full Name (Last, First, Middle Initial) Mr. Curtis D. Rooney			Date of Receipt
	Mailing Address 325 Seventh Street, NW Suite 700			03 / 06 / 2006
	City	State	Zip Code	Transaction ID: 12136377
	Washington	DC	20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Senior As	n ssociate Director	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		500.00	1
	Other (specify)	0 0	300.00	
В.	Full Name (Last, First, Middle Initial) Ms. Carla L. Luggiero			Date of Receipt
	Mailing Address 325 Seventh Street, NW			03 06 YYYY 2006
	Suite 700	State	Zip Code	Transaction ID: 12136329
	Washington	DC	20004-2818	Amount of Each Receipt this Period
	•		20004 2010	
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer American Hospital Associa-	Occupation		
	tion-Washingt		ciate Director	
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify) ▼	8 8	250.00	
<u> </u>	Full Name (Last, First, Middle Initial) Mr. Dwight L. Fine			Date of Receipt
	Mailing Address 12675 Riviera Heights F	Road		M M / D D / Y Y Y Y
	20			03 06 2006
	City Holts Summit	State MO	Zip Code 65043-2039	Transaction ID: 12141278
		IVIO	05045-2059	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		111.12
	Name of Employer Missouri Hospital Associa- tion		President, Government Rela	tic
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		222.24	1
	Other (specify)			
s	UBTOTAL of Receipts This Page (optional)			861.12
T	OTAL This Period (last page this line number or	1IV)		

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 7 / 66			
	EMIZED RECEIPTS		or each category of the	(check only one)		
••	LIMIZED RESERVES		Detailed Summary Page	X 11a 11b 11c 12 15 16	17	
Ar	ny information copied from such Reports and Sta	atements may	not be sold or used by any perso	n for the purpose of soliciting contributions		
or	for commercial purposes, other than using the r	name and add	dress of any political committee to	solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full)					
	American Hospital Association PAC					
Α.	Full Name (Last, First, Middle Initial) Mr. Marc D. Smith			Date of Receipt		
Α.	Mailing Address 5612 Tanner Bridge Roa	ad		M M / D D / Y Y Y Y		
				03 06 2006		
	City	State	Zip Code	Transaction ID: 12141290		
	Jefferson City MO		65101-8275	Amount of Each Receipt this Period	_	
	FEC ID number of contributing federal political committee.	C		111.12		
	Name of Employer Missouri Hospital Associa- tion	Occupation President	n t and Chief Executive Officer			
	Receipt For:	Aggregate	e Year-to-Date ▼			
	Primary General	1 1	222.24			
	Other (specify) 🔻	1 1				
В.				Date of Receipt		
	Mailing Address 3634 North Drinkwater Blvd			03 06 7 9 9 9		
	City	State	Zip Code	Transaction ID: 12136330		
	Scottsdale AZ		85251-5622	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		250.00		
	Name of Employer Scottsdale Healthcare	Occupation		7		
	Receipt For:		ent Relations Director e Year-to-Date ▼	_		
	Primary General	Aggregate	e real-lo-Dale V			
	Other (specify) ▼		250.00			
<u> </u>	Full Name (Last, First, Middle Initial) Mr. Robert V. Stanek			Date of Receipt		
Ο.	Mailing Address 14 Campus Boulevard,	Suite 300		M M / D D / Y Y Y Y		
		Cuite 600		03 06 2006		
	City	State	Zip Code	Transaction ID: 12136735		
	Newtown Square	PA	19073-3241	Amount of Each Receipt this Period	-	
	FEC ID number of contributing federal political committee.			1000.00		
	Name of Employer Catholic Health East	Occupation Presiden				
	Receipt For:	Aggregate	e Year-to-Date ▼			
	Primary General	-	1000.00			
	Other (specify) 🔻	1 1	1000.00			
s	UBTOTAL of Receipts This Page (optional)			1361.12		
					7	
T	TOTAL This Period (last page this line number only)					

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 66 (check only one) X 11a 11b 11c 12 13 14 15 16 17
An or i	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Δ.	Full Name (Last, First, Middle Initial) Mr. Tom Gruber Mailing Address 3405 Maplevale Circle City Newtown Square FEC ID number of contributing federal political committee.	State PA	Zip Code 19073-2766	Date of Receipt O 3
	Name of Employer Catholic Health East Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Vice Pres Aggregate		
3.	Full Name (Last, First, Middle Initial) Mr. Lex Smith Mailing Address P O Box 129 City El Reno	State OK	Zip Code 73036-0129	Date of Receipt M M O O O O O O O O O O O O O O O O O
	FEC ID number of contributing federal political committee. Name of Employer Parkview Hospital Receipt For: Primary General Other (specify)	Occupation Administr	1	Amount of Each Receipt this Period 250.00
C.	Full Name (Last, First, Middle Initial) Ms. Barbara Oestmann Mailing Address P O Box 727 City Alva FEC ID number of contributing federal political committee. Name of Employer Share Medical Center Receipt For: Primary General		Zip Code 73717-0727 n ecutive Officer Year-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SI	JBTOTAL of Receipts This Page (optional)			750.00
TO	OTAL This Period (last page this line number or	nly)		

SCHEDULE A (FEC Form 3X)			Llaa aanarata aahadula(a)	FOR LINE NUMBER: PAGE 9 / 66	
ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the	(check only one)	
•••	LIVIIZED RECEIP 13		Detailed Summary Page	X 11a 11b 11c 12	
_				13 14 15 16 17	
or	y information copied from such Reports and St for commercial purposes, other than using the	name and add	r not be sold or used by any persitress of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.	
	NAME OF COMMITTEE (In Full)				
\angle	American Hospital Association PAC				
A.	Full Name (Last, First, Middle Initial) Ms. Brenda Gail Summers			Date of Receipt	
	Mailing Address 1351 Anthem Court			03 20 2006	
	City	State	Zip Code	Transaction ID: 12254240	
	Charlotte	NC	28205-7981	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		250.00	
	Name of Employer The Greeley Company	Occupation Senior Co			
	Receipt For:		Year-to-Date ▼		
	Primary General			7	
	Other (specify) ▼		250.00		
В.	Full Name (Last, First, Middle Initial) Mr. Wayne NeSmith			Date of Receipt	
	Mailing Address 1105 Carriage Road			03 20 2006	
	City	State	Zip Code	Transaction ID: 12255754	
	Tallahassee	FL	32312-2501	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		1000.00	
	Name of Employer Florida Hospital Associat- ion	Occupation President			
	Receipt For:	Aggregate	Year-to-Date ▼		
	Primary General Other (specify) ▼		1000.00		
	Full Name (Last First APARIL 1999)				
C.	Full Name (Last, First, Middle Initial) Ms. Joanell M. Dyrstad			Date of Receipt	
	Mailing Address 910 West 6th Street	03 20 2006			
	City	State	Zip Code	Transaction ID: 12235527	
	Red Wing	MN	55066-2432	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		250.00	
	Name of Employer Fairview Red Wing Medical Center	Occupation Board Ch			
	Receipt For:	Aggregate	Year-to-Date ▼		
	Primary General Other (specify) ▼	0 0	250.00		
s	UBTOTAL of Receipts This Page (optional)			1500.00	
H	OTAL This Period (last page this line number of				

COHEDINE A /EEC Form 2V)				FOR LINE NUMBER: PAGE 10 / 66		
51	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	(check only one)		
IT	EMIZED RECEIPTS		or each category of the	X 11a 11b 11c 12		
			Detailed Summary Page	13 14 15 16 17		
Δr	y information copied from such Reports and Sta	atements may	y not be sold or used by any perso			
or	for commercial purposes, other than using the r	name and add	dress of any political committee to	solicit contributions from such committee.		
abla	NAME OF COMMITTEE (In Full)					
\rangle	American Hospital Association PAC					
Α.	Full Name (Last, First, Middle Initial) Ms. Mary M. Covington			Date of Receipt		
	Mailing Address 123 Briarwood Drive	03 20 2006				
	City	State	Zip Code	Transaction ID: 12235530		
	Carrollton	GA	30117-4104	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		250.00		
	Name of Employer Tanner Medical Center	Occupation Trustee	١			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00			
— В.	Full Name (Last, First, Middle Initial) Mr. William A. Bell			Date of Receipt		
	Mailing Address 944 Gentian Court			03 20 YYYYY 2006		
	City	State	Zip Code	Transaction ID: 12255737		
	Tallahassee	FL	32312-1228	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		500.00		
	Name of Employer Florida Hospital Associat- ion	Occupation General (7		
	Receipt For:	Aggregate	Year-to-Date ▼			
	Primary General Other (specify) ▼	0 0	500.00]		
<u> </u>	Full Name (Last, First, Middle Initial) Ms. Thomasine Kennedy			Date of Receipt		
	Mailing Address 2714 N.D. 41 & 50			03 20 2006		
	City	State	Zip Code	Transaction ID: 12235219		
	Chinquapin	NC	28521	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		250.00		
	Name of Employer Duplin General Hospital	Occupation Trustee	1			
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00]		
s	UBTOTAL of Receipts This Page (optional)			1000.00		
\vdash	1		_	-		

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 11 / 66
	EMIZED RECEIPTS		or each category of the	(check only one)
••			Detailed Summary Page	X 11a 11b 11c 12 15 16 17
An	y information copied from such Reports and St	atements may	not be sold or used by any perso	
or	for commercial purposes, other than using the	name and add	lress of any political committee to	solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
	American Hospital Association PAC			
A.	Full Name (Last, First, Middle Initial) Mr. E. Michael Nunamaker			Date of Receipt
	Mailing Address 2220 West Iowa Avenu	е		03 / 20 / 2006
	City	State	Zip Code	Transaction ID: 12302206
	Chickasha	OK	73018-2700	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer Grady Memorial Hospital	Occupation Chief Exe	n ecutive Officer	
	Receipt For:	Aggregate	Year-to-Date ▼	7
	Primary General		500.00	1
	Other (specify)	0 0		
В.	Full Name (Last, First, Middle Initial) Mr. Reginald M. Ballantyne, III			Date of Receipt
	Mailing Address 3266 East Valley Vista	03 / 20 / 4 9 9		
	City	State	Zip Code	Transaction ID: 12235559
	Paradise Valley AZ		85253-3738	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		500.00
	Name of Employer Vanguard Health System	Occupation Corporate	n e Officer & Senior Vice Pres	id
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	500.00	
— С.	Full Name (Last, First, Middle Initial) Ms. A. Christine Delucas			Date of Receipt
J .	Mailing Address 34 Sandpiper Place			M M / D D / Y Y Y Y
				03 20 2006
	City	State	Zip Code	Transaction ID: 12254241
	Alameda	CA	94502-7418	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Mills-Peninsula Health Se-	Occupation		7
	rvices		sident, Acute Care Services	
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	,
	Other (specify)		500.00	
	IIDTOTAL of Descints This Desc (action 1)			1250.00
L	UBTOTAL of Receipts This Page (optional)			
T	OTAL This Period (last page this line number of	only)		

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 12/66
ITEMIZED RECEIPTS		or each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12
		, J	13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the	name and add	y not be sold or used by any persor dress of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Full Name (Last, First, Middle Initial) A. Mr. Richard E. Meiers			Date of Receipt
Mailing Address 908 Hokulani Street			03 / 20 / Y Y Y Y Y
City	State	Zip Code	Transaction ID: 12235595
Honolulu FEC ID number of contributing federal political committee.	C	96825-1021	Amount of Each Receipt this Period 500.00
Name of Employer Healthcare Association of Hawaii			
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Ms. Phillis Oeters-Pena Ms. Phillis Address COSE Pad Page Cuite			Date of Receipt
Mailing Address 6855 Red Road, Suite	03 / 20 / 2006		
City	State	Zip Code	Transaction ID: 12255748
Coral Gables	FL	33143	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Baptist Health South Flor-	Occupatio Vice Pres	n sident, Government Relations	
<u>ida</u> Receipt For:		e Year-to-Date V	<u>, </u>
Primary General Other (specify) ▼	0 0	250.00	
Full Name (Last, First, Middle Initial) Mr. Dwight L. Fine			Date of Receipt
Mailing Address 12675 Riviera Heights	Road		03 20 7 2006
City	State	Zip Code	Transaction ID: 12219611
Holts Summit	MO	65043-2039	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		111.12
Name of Employer Missouri Hospital Associa- tion	Occupatio Sr. Vice	n President, Government Relati	id
Receipt For:		e Year-to-Date ▼	
Primary General Other (specify) ▼		333.36	
SUBTOTAL of Receipts This Page (optional))	861.12
TOTAL This Period (last page this line number	only)		

S	CHEDULE A (FEC Form 3X)		Llan apparata ashadula(s)	FOR LINE NUMBER: PAGE 13 / 66
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)
11	LIVIIZED NEGEIF I 3		Detailed Summary Page	X 11a 11b 11c 12
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An or	ly information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	r not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{}$	NAME OF COMMITTEE (In Full)			
\rangle	American Hospital Association PAC			
۹.	Full Name (Last, First, Middle Initial) Dr. Anthony R Tersigni, , Ed.D., F			Date of Receipt
	Mailing Address 4600 Edmundson Road			03 20 20 2006
	City	State	Zip Code	Transaction ID: 12235531
	Saint Louis	MO	63134-3806	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		1000.00
	Name of Employer Ascension Health	Occupation President	n t and Chief Executive Office	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		1000.00	1
	Other (specify)	0 0		1
3.	Full Name (Last, First, Middle Initial) Ms. Kathleen M. Whyte	Date of Receipt		
	Mailing Address 444 North Capitol St, NV Suite 532	03 / 20 / 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4		
	City State Zip Code			Transaction ID: 12255736
	Washington	DC	20001-1512	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		600.00
	Name of Employer Florida Hospital Associat-	Occupation		
	ion Receipt For:		President, Federal Advocacy e Year-to-Date ▼	<u></u>
	Primary General	Aggregate	r rear-to-Date V	1
	Other (specify) ▼	0 0	600.00	
).	Full Name (Last, First, Middle Initial) Mr. David E. Morton, Dr. P.H.,			Date of Receipt
	Mailing Address 2825 Natchz Trail			03 20 2006
	City	State	Zip Code	Transaction ID: 12302204
	Edmond	OK	73003-3622	Amount of Each Receipt this Period
	FEC ID number of contributing	С		250.00
	federal political committee.	0		
	Name of Employer American Hospital Associa-	Occupation		
	tion-Chicago '		Executive	_
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	,
	Other (specify)	' '	250.00	
		- 0 0		
s	UBTOTAL of Receipts This Page (optional)			1850.00
_			_	
T	OTAL This Period (last page this line number or	าly))	

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 14 / 66
ITEMIZED RECEIPTS			or each category of the	(check only one)
•••	LIMIZED RECEIF 13		Detailed Summary Page	X 11a 11b 11c 12
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or	ny information copied from such Reports and St for commercial purposes, other than using the	atements may name and add	r not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
	American Hospital Association PAC			
A.	Full Name (Last, First, Middle Initial) Mr. Ralph Glatfelter			Date of Receipt
	Mailing Address 7285 Heartland Circle			03 20 2006
	City	State	Zip Code	Transaction ID: 12255753
	Tallahassee	FL	32312-7501	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		600.00
	Name of Employer Florida Hospital Associat- ion	Occupation Senior Vi	n ce President	
	Receipt For:		Year-to-Date ▼	
	Primary General		600.00	1
	Other (specify) ▼	0 0	600.00	
В.	Full Name (Last, First, Middle Initial) Ms. Karen Late, MHS			Date of Receipt
	Mailing Address 444 North Capitol Stree	t, NW		M M / D D / Y Y Y Y
	Suite 532	03 20 2006		
	City	State	Zip Code	Transaction ID: 12255734
	Washington	DC	20001-1512	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Florida Hospital Associat-	Occupation		
	ion		Federal Advocacy	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	' '	500.00	
	Other (specify)	0 0	0 0 0 0 0 0 0	
C.	Full Name (Last, First, Middle Initial) Mr. Ernest R. Sutton			Date of Receipt
	Mailing Address 1722 Edgewood Drive			03 / 20 / 4 9 9 9
	City	State	Zip Code	Transaction ID: 12235218
	Elizabeth City	NC	27909-6616	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Albemarle Hospital	Occupation Trustee	ו	
	Receipt For:		Year-to-Date ▼	7
	Primary General		050.00	1
	Other (specify) ▼	0 0	250.00	
S	UBTOTAL of Receipts This Page (optional)			1350.00
\vdash				-
Ιт	OTAL This Period (last page this line number of	nlv)		

	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 15 / 66 (check only one)
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
An or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Α.	Full Name (Last, First, Middle Initial) Ms. Audrey M. White Mailing Address 25 Concord Street			Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 12219496
	Peterborough FEC ID number of contributing federal political committee.	C	03458-1510	Amount of Each Receipt this Period 250.00
	Name of Employer Monadnock Community Hospital Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Trustee Aggregate	e Year-to-Date ▼ 250.00	
3.	Full Name (Last, First, Middle Initial) Mr. Rich Rasmussen Mailing Address 405 El Destinado Drive			Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 12255735
	Tallahassee	FL	32301-1522	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Florida Hospital Associat- ion		rategic Communications	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 500.00	
) .	Full Name (Last, First, Middle Initial) Ms. Martha DeCastro			Date of Receipt
	Mailing Address 1036 Alameda Drive			03 / 20 / 4 2006
	City Tallahassee	State FL	Zip Code 32317-9577	Transaction ID: 12255733 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		300.00
	Name of Employer Florida Hospital Associat- ion	Occupation VP, Nurs	ing	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 300.00	
SI	JBTOTAL of Receipts This Page (optional)			1050.00
T	OTAL This Period (last page this line number or	nly)	>	

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 16 / 66
•			Use separate schedule(s) or each category of the	(check only one)
ITEMIZED RECEIPTS			Detailed Summary Page	X 11a 11b 11c 12
			Dotailed Carifficacy Fage	13 14 15 16 17
Ar	y information copied from such Reports and Sta	atements may	not be sold or used by any perso	on for the purpose of soliciting contributions
or	for commercial purposes, other than using the	name and add	lress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	American Hospital Association PAC			
Α.	Full Name (Last, First, Middle Initial) Ms. Kathy Holzer			Date of Receipt
	Mailing Address 306 East College Avenu	ıe		03 20 2006
	City	State	Zip Code	Transaction ID: 12255755
	Tallahassee	FL		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer Florida Hospital Associat-	Occupation		
	<u>ion</u>		sident, Health Policy	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	' '	250.00	
	Other (specify)	0 0		
В.	Full Name (Last, First, Middle Initial) Mr. Mark D. Pilla			Date of Receipt
	Mailing Address One Log Road			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 12304306
	Tabernacle	NJ	08088-9730	Amount of Each Receipt this Period
	FEC ID number of contributing		1 1 1 1 1 1	
	federal political committee.	C		500.00
	Name of Employer	Occupation	1	
	Saint Barnabas Health Care System	Executive	e Vice President	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		500.00	1
	Other (specify)	0 0	500.00	
<u> </u>	Full Name (Last, First, Middle Initial) Mr. David P. Lavins			Date of Receipt
	Mailing Address 10 Fox Chase Road			M M / D D / Y Y Y Y Y O O O O O
	City	State	Zip Code	Transaction ID: 12304243
	Malvern	PA	19355-3441	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	С		30.00
	Name of Employer New Jersey Hospital Assoc-	Occupation		
	iation		ancial Officer	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		410.00	
	Other (specify)		710.00	J.
_	LIDTOTAL ACDAS AS THE STATE OF			780.00
L	UBTOTAL of Receipts This Page (optional)		••••••••••••••••••••••••••••••••••••••	
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S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 17 / 66
	•		Use separate schedule(s) or each category of the	(check only one)
Ш	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
			Dotailed Currintary 1 age	13 14 15 16 17
Ar	y information copied from such Reports and St	atements may	not be sold or used by any person	on for the purpose of soliciting contributions
or	for commercial purposes, other than using the	name and add	dress of any political committee to	o solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
	American Hospital Association PAC			
Α.	Full Name (Last, First, Middle Initial) Dr. Joel D. Ohlsen, M.D.			Date of Receipt
	Mailing Address Post Office Box 399			03 / 29 / 2006
	City	State	Zip Code	Transaction ID: 12259092
	Rye	CO	81069-0399	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer St. Mary-Corwin Medical Center	Occupation Director	n Cancer Center	7
	Receipt For:		Year-to-Date ▼	1
	Primary General			1
	Other (specify) ▼	0 0	500.00	
— В.	Full Name (Last, First, Middle Initial) Ms. Sarah B. Buck			Date of Receipt
	Mailing Address 2052 Pinehurst Drive			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 12259097
	Ames	IA	50010-4561	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		250.00
	Name of Employer Mary Greeley Medical Cent-	Occupation	1	
	er	Trustee		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	' '	250.00	
	Other (specify)	0 0		1
<u> </u>	Full Name (Last, First, Middle Initial) Mr. Henry M. Altman, Jr.			Date of Receipt
	Mailing Address 508 Tiffany Lane			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 12259098
	Louisville	KY	40207-1426	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Jewish Hospital - St. Mar-	Occupation Trustee	١	
	y's HealthCar Receipt For:		Year-to-Date V	\dashv
	Primary General	Aggregate	Toul to Date ▼	- 1
	Other (specify)		500.00	
_	IIDTOTAL of Descints This Desc (cution 1)		_	1250.00
\vdash	UBTOTAL of Receipts This Page (optional)			

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 18 / 66 (check only one) X 11a 11b 11c 12 13 14 15 16 17
An or	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Α.	Full Name (Last, First, Middle Initial) Mr. Kenneth A. Becker Mailing Address 509 Beaumont Circle City West Chester FEC ID number of contributing federal political committee. Name of Employer Catholic Health East	State PA C		Date of Receipt M M M / 29 / 2006 Transaction ID: 12255995 Amount of Each Receipt this Period 500.00
	Receipt For: Primary General Other (specify)		sident Advocacy and Govern Year-to-Date ▼ 500.00	<u>im</u> ent
3.	Full Name (Last, First, Middle Initial) Ms. Joan Soriano Mailing Address 2119 East 17th Street City Bremerton FEC ID number of contributing federal political committee. Name of Employer Harrison Medical Center Receipt For: Primary General Other (specify)	State WA C Occupation Trustee Aggregate	Zip Code 98310-4413	Date of Receipt M M M / 29 / 2006 Transaction ID: 12259099 Amount of Each Receipt this Period 250.00
C .	Full Name (Last, First, Middle Initial) Ms. Rita M. Turley, MS, RN Mailing Address 351 Morningside Lane N City Billings FEC ID number of contributing federal political committee. Name of Employer Sisters of Charity of Leavenworth Heal Receipt For: Primary General Other (specify)	State MT C Occupation Regional	Zip Code 59105-2873 Note President Year-to-Date ▼ 500.00	Date of Receipt M M
S	UBTOTAL of Receipts This Page (optional)		······	1250.00
T	OTAL This Period (last page this line number o	nly)		

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 19 / 66
			Use separate schedule(s) or each category of the	(check only one)
Ш	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
			Dotailed Carifficacy 1 age	13 14 15 16 17
An	y information copied from such Reports and Sta	atements may	not be sold or used by any perso	on for the purpose of soliciting contributions
or	for commercial purposes, other than using the r	name and add	lress of any political committee to	solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
	American Hospital Association PAC			
Α.	Full Name (Last, First, Middle Initial) Mr. Scott Share			Date of Receipt
	Mailing Address 1600 Haddon Avenue			03 29 2006
	City	State	Zip Code	Transaction ID: 12255948
	Camden	NJ	08103-3101	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Catholic Health East	Occupation Vice Pres	n sident, Marketing	
	Receipt For:		Year-to-Date ▼	
	Primary General		050,00	1
	Other (specify) 🔻		250.00	
— В.	Full Name (Last, First, Middle Initial) Dr. Donald J. Breckon, Ph.D			Date of Receipt
٥.	Mailing Address 7320 N.W. Katie Circle			M M / D D / Y Y Y Y
	7520 N. VV. Natie Officie			03 29 2006
	City	State	Zip Code	Transaction ID: 12259095
	<u>Parkville</u>	MO	64152-1988	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer	Occupation	1	7
	Saint Luke's Northland Ho- spital	Trustee		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	-	250.00	1
	Other (specify)	0 0	250.00	
<u> </u>	Full Name (Last, First, Middle Initial) Ms. Margaret Allison			Date of Receipt
	Mailing Address 200 Morningside Dr			03 29 2006
	City	State	Zip Code	Transaction ID: 12259091
	San Antonio	TX	78209-4734	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		1000.00
	Name of Employer Methodist Healthcare Syst-	Occupation		7
	em of San Ant		MHS Board of Governors	_
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		1000.00	
	☐ Office (Specify) ♥			1
6	UBTOTAL of Receipts This Page (optional)			1500.00
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SCHEDULE A (FEC Form 3X) Use separate schedule(s)			FOR LINE NUMBER: PAGE 20 / 66				
ITEMIZED RECEIPTS		or each category of the	(check only one)				
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A . (13 14 15 16 17				
Any information copied from such Reports and St or for commercial purposes, other than using the	atements may name and ado	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.				
NAME OF COMMITTEE (In Full)							
American Hospital Association PAC							
/ / / / / / / / / / / / / / / / / / /							
Full Name (Last, First, Middle Initial)							
A. Dr. E. A. Clark, M.D.			Date of Receipt				
Mailing Address 707 Hellybrook Drive			03 29 2006				
City	State	Zip Code	Transaction ID: 12259096				
Longview	TX	75605-2410	Amount of Each Receipt this Period				
		73003 2410					
FEC ID number of contributing federal political committee.	C		250.00				
<u> </u>							
Name of Employer Longview Regional Medical	Occupation	1					
<u>Center</u>	Trustee	Versite Deta					
Receipt For: Primary General	Aggregate	Year-to-Date ▼					
Other (specify)	' '	250.00					
Carlor (oposity) 🔻		1 1 1 1 1 1 1					
Full Name (Last, First, Middle Initial)							
B. Ms. Marjorie Swetonic			Date of Receipt				
Mailing Address 3104 Faiss Dr.			M M / D D / Y Y Y Y				
		7. 0.	03 29 2006				
City	State	Zip Code	Transaction ID: 12259094				
Las Vegas	NV	89134-7432	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C		500.00				
rederal political committee.							
Name of Employer MountainView Hospital	Occupation	า					
iviountainview Hospitai	Vice Cha	ir					
Receipt For:	Aggregate	e Year-to-Date ▼					
Primary General		500.00	1				
Other (specify)	0 0		J				
Full Name (Last, First, Middle Initial)			+				
C. Mr. Charles Thoele			Date of Receipt				
Mailing Address 9228 Mountain Ash Tra	ail		M M / D D / Y Y Y				
			03 29 2006				
City	State	Zip Code	Transaction ID: 12259093				
Saint Louis	MO	63126-2211	Amount of Each Receipt this Period				
FEC ID number of contributing	C		500.00				
federal political committee.							
Name of Employer St. John's Mercy Health	Occupation	า					
Care		n of the Board					
Receipt For:	Aggregate	Year-to-Date ▼					
Primary General		500.00					
Other (specify) ▼			J				
SUBTOTAL of Receipts This Page (optional)			1250.00				
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TOTAL This Period (last page this line number of	TOTAL This Period (last page this line number only)						

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 21 / 66 (check only one)
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a
			Detailed Summary Page	13 14 15 16 17
An or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{}$	NAME OF COMMITTEE (In Full)			
\rangle	American Hospital Association PAC			
۹.	Full Name (Last, First, Middle Initial) Mr. James A Wathen			Date of Receipt
	Mailing Address 1465 Beach Loop Road			03 / 30 / 4 2006
	City	State	Zip Code	Transaction ID: 12261815
	Bandon	OR	97411-8801	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Southern Coos Hospital and Health Cent	Occupation Chief Exe	n ecutive Officer	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		250.00	
3.	Full Name (Last, First, Middle Initial) Mr. Alexander R. White, Jr.			Date of Receipt
	Mailing Address PO Box 15587			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR331416016617
	Austin	TX	78761-5587	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		124.98
	Name of Employer American Hospital Associa- tion	Occupation AHA Reg	n jional Executive for TX	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		291.62	P/R Deduction (\$41.66 Bi- Weekly)
 C.	Full Name (Last, First, Middle Initial) Dr. Donald Nielsen, MD			Date of Receipt
	Mailing Address 195 Oxford Court			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR330524816617
	Alamo	CA	94507-1753	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		120.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Senior Vi	n ice President	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	280.00	P/R Deduction (\$40.00 Bi- Weekly)
s	UBTOTAL of Receipts This Page (optional)			494.98
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	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 22 / 66 (check only one)			
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17			
An or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.			
$\overline{\ }$	NAME OF COMMITTEE (In Full)						
_	American Hospital Association PAC						
۹.	Full Name (Last, First, Middle Initial) Mr. Paul N. Muraca			Date of Receipt			
	Mailing Address 4960 138th Circle West			M M / D D / Y Y Y Y			
	City	State	Zip Code	Transaction ID: PR330475416617			
	Apple Valley	MN	55124-9229	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		120.00			
	Name of Employer American Hospital Associa-	Occupation	n Executive				
	tion-Chicago Receipt For:		Year-to-Date ▼	-			
	Primary General	00 0		P/R Deduction (\$40.00 Bi-			
	Other (specify)		280.00	Weekly)			
3.	Full Name (Last, First, Middle Initial) Mr. W. Thomas Deweese			Date of Receipt			
	Mailing Address 500 Interstate Boulevard	South		M " M / D " D / Y " Y " Y " Y			
	City	State	Zip Code	Transaction ID: PR329215716617			
	Nashville	TN	37210-4634	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	С		120.00			
	Name of Employer American Hospital Associa-	Occupation					
	tion-Chicago Receipt For:	. ·	Executive e Year-to-Date T	-			
	Primary General	7.99.094.0		P/R Deduction (\$40.00 Bi-			
	Other (specify) ▼	0 0	280.00	Weekly)			
Э.	Full Name (Last, First, Middle Initial) Ms. Anne E. Ubl			Date of Receipt			
	Mailing Address 801 Pennsylvania Ave, N #245	W		M M / D D / Y Y Y Y			
	City	State	Zip Code	Transaction ID: PR328767016617			
	Washington	DC	20004-2615	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		120.00			
	Name of Employer American Hospital Associa-	Occupation		7			
	tion-Washingt		sident, Federal Relations				
	Receipt For:	Aggregate	e Year-to-Date ▼				
	Primary General Other (specify) ▼		280.00	P/R Deduction (\$40.00 Bi- Weekly)			
S	SUBTOTAL of Receipts This Page (optional)						
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T	OTAL This Period (last page this line number or	nly)	>				

S	CHEDULE A (FEC Form 3X)		11	FOR LINE NUMBER: PAGE 23 / 66
ITEMIZED RECEIPTS			Use separate schedule(s) or each category of the	(check only one)
•	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
_				13 14 15 16 17
An or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ }$	NAME OF COMMITTEE (In Full)			
\rangle	American Hospital Association PAC			
۹.	Full Name (Last, First, Middle Initial) Mr. Richard H. Wade			Date of Receipt
	Mailing Address 1221 Cavalier Road			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR328310416617
	Arnold	MD	21012-2126	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		120.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Sr. Vice I	n President, Communications	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	280.00	P/R Deduction (\$40.00 Bi- Weekly)
3.	Full Name (Last, First, Middle Initial) Ms. Christine R Wray			Date of Receipt
	Mailing Address P O Box 527			03 / 31 / 2006
	City	State	Zip Code	Transaction ID: 12261865
	Leonardtown	MD	20650-0527	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		500.00
	Name of Employer St. Mary's Hospital	Occupation President	n t and Chief Executive Officer	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	
	Full Name (Last, First, Middle Initial) Mr. Richard J. Pollack			Date of Receipt
	Mailing Address 325 Seventh Street, NW Suite 700	,		M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR328260916617
	Washington	DC	20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		240.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Executive	n e Vice President	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary ☐ General Other (specify) ▼		560.00	P/R Deduction (\$80.00 Bi- Weekly)
s	UBTOTAL of Receipts This Page (optional)			860.00
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- 1	OTAL This Period (last page this line number or	пу)		

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 24 / 66
IT	EMIZED RECEIPTS		or each category of the	(check only one) X 11a
			Detailed Summary Page	13 14 15 16 17
Ar	ny information copied from such Reports and State	ements may	not be sold or used by any perso	n for the purpose of soliciting contributions
or	for commercial purposes, other than using the na	me and add	aress of any political committee to	solicit contributions from such committee.
$ \rangle$	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
	American Hospital Association 1 Ac			
_	Full Name (Last, First, Middle Initial)			Data of Bassist
Α.	Dr. James D. Bentley, Ph.D. Mailing Address 13106 Vingle Lane			Date of Receipt
	Walling Address 13106 Villgle Latte			W W , B B , T T T T
	City	State	Zip Code	Transaction ID: PR328224916617
	Silver Spring	MD	20906	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		120.00
	Name of Employer American Hospital Associa-	Occupation	n	
	tion-Washingt	Sr. Vice I		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	' '	280.00	P/R Deduction (\$40.00 Bi- Weekly)
	cale. (epoolity) 🗸	-		1
В.	Full Name (Last, First, Middle Initial) Mr. Calbreith L. Simpson			Date of Receipt
	Mailing Address 325 Seventh Street, NW			M M / D D / Y Y Y Y
	Suite 700 City State Zip Code			Transaction ID. PD222224816617
	Washington	DC	20004-2818	Transaction ID: PR328224816617 Amount of Each Receipt this Period
	FEC ID number of contributing		1 1 1 1 1 1	
	federal political committee.	C		120.00
	Name of Employer	Occupation	<u> </u>	-
	Name of Employer American Hospital Associa- tion-Washingt	•	Executive	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		280.00	P/R Deduction (\$40.00 Bi- Weekly)
	Other (specify) ▼			(Weekly)
_	Full Name (Last, First, Middle Initial)			
C.	Mr. Stephen M. Ahnen Mailing Address 1001 N. Potomac St.			Date of Receipt
	Mailing Address 1001 N. Potomac St.			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR328312716617
	Arlington	VA	22205-1629	Amount of Each Receipt this Period
	FEC ID number of contributing	С		120.00
	federal political committee.			
	Name of Employer American Hospital Associa-	Occupation		
tion-Washingt Serilor			ce President e Year-to-Date ▼	-
	Primary General	Aggregate		P/R Deduction (\$40.00 Bi-
	Other (specify) ▼		280.00	Weekly)
_				
	IIPTOTAL of Possints This Poss (entire -1)		_	360.00
\vdash	UBTOTAL of Receipts This Page (optional)		······································	
Т	OTAL This Period (last page this line number onl	y))	

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 25 / 66 (check only one)
IT	EMIZED RECEIPTS		or each category of the	X 11a
			Detailed Summary Page	13 14 15 16 17
An or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	y not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ }$	NAME OF COMMITTEE (In Full)			
\rangle	American Hospital Association PAC			
۹.	Full Name (Last, First, Middle Initial) Mr. Richard J. Davidson			Date of Receipt
	Mailing Address 325 Seventh Street, NW Suite 700			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR327942116617
	Washington	DC	20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		120.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation President		
	Receipt For:	Aggregate	e Year-to-Date ▼	7
	Primary General Other (specify) ▼	1 1	280.00	P/R Deduction (\$40.00 Bi- Weekly)
3.	Full Name (Last, First, Middle Initial) Mr. Larry A. Schulz			Date of Receipt
	Mailing Address 7650 Edwinborough Wa Suite 200	у		03 / 31 / 2006
	City	State	Zip Code	Transaction ID: 12312924
	Minneapolis	MN	55435-5978	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer Catholic Health Initiativ- es	Occupation Sr. Vice I	n President, Operations	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		250.00	
 C.	Full Name (Last, First, Middle Initial) Ms. Lori M. Schor			Date of Receipt
	Mailing Address 325 Seventh Street, NW Suite 700			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR328341816617
	Washington	DC	20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		120.00
	Name of Employer American Hospital Associa-	Occupation Director.	n Political Action & Grassroot	
	tion-Washingt Receipt For:	· · · · · · · · · · · · · · · · · · ·	e Year-to-Date ▼	-
	Primary General Other (specify) ▼		280.00	P/R Deduction (\$40.00 Bi- Weekly)
s	UBTOTAL of Receipts This Page (optional)		_	490.00
T	OTAL This Period (last page this line number or	ılv)		

S	CHEDULE A (FEC Form 3X)		Llas concrete cohodulo(s)	FOR LINE NUMBER: PAGE 26 / 66
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)
	EINIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
_				13 14 15 16 17
An or	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\ }$	NAME OF COMMITTEE (In Full)			
\rangle	American Hospital Association PAC			
۹.	Full Name (Last, First, Middle Initial) Ms. Barbara Lorsbach			Date of Receipt
	Mailing Address 204 South 7th Avenue			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR328136916617
	<u>La Grange</u>	IL	60525-6406	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		120.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Sr. Vice I	n President, Member Relations	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		280.00	P/R Deduction (\$40.00 Bi- Weekly)
 3.	Full Name (Last, First, Middle Initial) Dr. Carol A. Watson, Ph.D., RN			Date of Receipt
	Mailing Address 701 10th Street, SE			03 / 31 / 2006
	City	State	Zip Code	Transaction ID: 12261821
	Cedar Rapids	IA	52403-1292	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Mercy Medical Center	Occupation Sr. Vice I	n President, Clinical Services	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	
 C.	Full Name (Last, First, Middle Initial) Mr. John F. Barry			Date of Receipt
	Mailing Address One North Franklin			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR327877816617
	Millis	MA	60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		124.98
	Name of Employer American Hospital Associa-	Occupation		7
	tion-Chicago		Executive	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary ☐ General Other (specify) ▼	0 0	291.62	P/R Deduction (\$41.66 Bi- Weekly)
s	UBTOTAL of Receipts This Page (optional)			744.98
T-	OTAL This Period (last page this line number o	nlv)		
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S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 27 / 66 (check only one)
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
An or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
<u>′</u> ۵.	Full Name (Last, First, Middle Initial) Mr. James F Hanko			Date of Receipt
	Mailing Address 3405 Riverside Dr. NE			03 / 31 / 2006
	City Bemidji	State MN	Zip Code	Transaction ID: 12312920
	FEC ID number of contributing federal political committee.	C	56601-5310	Amount of Each Receipt this Period 45.45
	Name of Employer North Country Regional Ho- spital	1	t and Chief Executive Officer	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 462.15	
3.	Full Name (Last, First, Middle Initial) Mr. Mark Seklecki			Date of Receipt
	Mailing Address 325 Seventh Street, NW Suite 700		7.0	M M / D D / Y Y Y Y
	City Washington	State DC	Zip Code 20004-2818	Transaction ID: PR327858016617 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	20004-2010	120.00
	Name of Employer American Hospital Associa- tion-Washingt Receipt For:		n e Director, AHAPAC e Year-to-Date ▼	
	Primary General Other (specify) ▼	Aggregate	280.00	P/R Deduction (\$40.00 Bi- Weekly)
) .	Full Name (Last, First, Middle Initial) Mr. Lindsay Mac Robinson			Date of Receipt
	Mailing Address 107 East Lane			M M / D D / Y Y Y Y
	City	State II	Zip Code	Transaction ID: PR327727316617
	Lake Barrington FEC ID number of contributing federal political committee.	C	60010-1939	Amount of Each Receipt this Period 120.00
	Name of Employer American Hospital Associa- tion-Chicago Receipt For:		n sident, PMGs e Year-to-Date ▼	
	Primary General Other (specify) ▼	Aggregate	280.00	P/R Deduction (\$40.00 Bi- Weekly)
S	UBTOTAL of Receipts This Page (optional)			285.45
T	OTAL This Period (last page this line number or	nly)	>	

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 28 / 66
	EMIZED RECEIPTS		or each category of the	(check only one)
••			Detailed Summary Page	X 11a 11b 11c 12 15 16 17
Δη	y information copied from such Reports and Si	tatements may	y not he sold or used by any ners	
or	for commercial purposes, other than using the	name and add	dress of any political committee to	o solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
	American Hospital Association PAC			
Α.	Full Name (Last, First, Middle Initial) Ms. Deborah F. Weiner			Date of Receipt
	Mailing Address 11004 Petersborough			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR327745916617
	Rockville	<u>MD</u>	20852-3249	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		120.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Director,	n Grassroots Advocacy	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		280.00	P/R Deduction (\$40.00 Bi-
	Other (specify) ▼		200.00	Weekly)
В.				Date of Receipt
	Mailing Address 521 Great Falls Street			M " M / D " D / Y " Y " Y " Y
	City	State	Zip Code	Transaction ID: PR331533216617
	Falls Church	VA	22046-2613	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		120.00
	Name of Employer American Hospital Associa-	Occupation	ı	
	tion-Washingt		sident, Policy	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		260.00	P/R Deduction (\$40.00 Bi- Weekly)
<u> </u>	Full Name (Last, First, Middle Initial) Ms. Mary M. Fugua			Date of Receipt
	Mailing Address 96 Grandview Drive			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 12261826
	Williamstown	MA	01267-2528	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Berkshire Health Systems, Inc.	Occupation Trustee	٦	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		250.00	7
	Other (specify) ▼		250.00	1
s	UBTOTAL of Receipts This Page (optional)			490.00
Ť				-
T	OTAL This Period (last page this line number	only)		

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 29 / 66
	EMIZED RECEIPTS		or each category of the	(check only one) X 11a 11b 11c 12
			Detailed Summary Page	X 11a 11b 11c 12 15 16 17
Ar	ny information copied from such Reports and Sta	tements may	not be sold or used by any perso	n for the purpose of soliciting contributions
or	for commercial purposes, other than using the n	ame and add	dress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	American Hospital Association PAC			
_	Full Name (Last, First, Middle Initial)			2. (2.)
Α.	Ms. Melinda Reid Hatton Mailing Address 325 Seventh Street, NW	1		Date of Receipt
	Suite 700			W W / B B / T T T T T T
	City	State	Zip Code	Transaction ID: PR1045726216617
	Washington	DC	20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		120.00
	Name of Employer American Hospital Associa-	Occupation		7
	tion-Washingt Receipt For:		ief Washington Counsel e Year-to-Date ▼	_
	Primary General	Aggregate		P/R Deduction (\$40.00 Bi-
	Other (specify) ▼	0 0	280.00	Weekly)
— В.	Full Name (Last, First, Middle Initial) Mr. David Vandeventer			Date of Receipt
	Mailing Address 3840 West 9th Street P.O. Box 1260			03 / 31 / 2006
	City	State	Zip Code	Transaction ID: 12312919
	Waterloo	<u>IA</u>	50702-5914	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Emergency Practice Associ-	Occupation		
	ates Receipt For:		of Business Relations e Year-to-Date ▼	_
	Primary General	Aggregate		1
	Other (specify) ▼	0 0	250.00	
C.	Full Name (Last, First, Middle Initial) Ms. Diane Gail Stewart			Date of Receipt
Ο.	Mailing Address 7700 Folsom Boulevard			M M / D D / Y Y Y Y
				03 31 2006
	City	State	Zip Code	Transaction ID: 12261830
	Sacramento	CA	95826-2608	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Sutter Center for Psychia-	Occupation		
	try Receipt For:		ministrative Officer e Year-to-Date ▼	\dashv
	Primary General	7.99.094.0		1
	Other (specify)		250.00	
s	UBTOTAL of Receipts This Page (optional)			620.00
			•	-
T	OTAL This Period (last page this line number or	nly)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: PAGE 30 / 66 Use separate schedule(s) (check only one) or each category of the 11a 11b 11c **Detailed Summary Page** 13 14 16 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) A. Mr. Rogers Anderson Date of Receipt Mailing Address 2021 Carothers Road 3 1 03 2006 City State Zip Code Transaction ID: 12261828 Franklin TN 37067-5822 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer Williamson Medical Center Occupation Trustee Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify)

SUBTOTAL of Receipts This Page (optional)	•	250.00
TOTAL This Period (last page this line number only)	•	22818.77

	CHEDULE A (FEC Form 3X)		Use separate schedule(s) or each category of the	FOR LINE NUMBER: PAGE 31 / 66 (check only one)
IT	EMIZED RECEIPTS		Detailed Summary Page	11a 11b X 11c 12 13 14 15 16 17
An or	ly information copied from such Reports and Staten for commercial purposes, other than using the nam	ments may ne and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
\rangle	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
۹.	Full Name (Last, First, Middle Initial) Northcoast PAC			Date of Receipt
	Mailing Address 2200 Jefferson Avenue			03 20 7 2006
	City	State	Zip Code	Transaction ID: 12332071
	Toledo	OH	43624	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C C00	0201293	833.00
	Name of Employer	Occupation	ו	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		833.00	
3.	Full Name (Last, First, Middle Initial) OhioHealth Star PAC			Date of Receipt
	Mailing Address 1087 Dennison Avenue			03 20 7 2006
	City	State	Zip Code	Transaction ID: 12322817
	Columbus	OH	43201	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C C00	0210617	833.00
	Name of Employer C	Occupation	ו	1
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 833.00	

			-		 1000.0	•
SUBTOTAL of Receipts This Page (optional)	•	<u></u>			 1666.0	0
TOTAL This Period (last page this line number only)	•				 1666.0	0

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)			UMBER:	PAGE	32 / 66		
	EMIZED RECEIPTS		or each category of the	(check	only o	ne)		_		
•••	EMIZED RECEIPTS		Detailed Summary Page	ı —	1a	11b	- · ⊢	12	_	
					3	14	15	16	17	4
Ar or	ny information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	not be sold or used by any perso ress of any political committee to	on for the solicit co	purpos ntributi	e of solicit	ing contrik such comr	outions nittee.		
	NAME OF COMMITTEE (In Full)									
/	American Hospital Association PAC									
Α.	Full Name (Last, First, Middle Initial) New York Hospital & Healthcare Assoc. FED PAC			Da	te of R	eceipt				
	Mailing Address One Empire Drive				3 ^M	31	/ Y Y	2006		
	City	State	Zip Code	Tra	nsacti	on ID: 12	309236			
	Rensselaer	NY	12144	An	nount o	f Each Red	ceipt this F	Period		
	FEC ID number of contributing federal political committee.	C C00	1160259				10	000.00)	
	Name of Employer	Occupation	1							
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 20000.00]						
В.	Full Name (Last, First, Middle Initial) AZHHA Political Action Committee (Federal)			Da	te of R	eceipt				_
	Mailing Address 2901 North Central Aver Suite 900	nue			3	31	/ Y Y 2	2006		
	City	State	Zip Code	Tra	nsacti	on ID: 12	335049			
	Phoenix	AZ	85012	An	nount o	f Each Red	ceipt this F	Period		
	FEC ID number of contributing federal political committee.	C C00	0217687				7	500.00)	
	Name of Employer	Occupation	1							
	Receipt For: Primary General	Aggregate	Year-to-Date ▼							
	Other (specify)		7500.00							

SUBTOTAL of Receipts This Page (optional)	•	17500.00
TOTAL This Period (last page this line number only)	<u> </u>	17500.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 33 / 66 (check only one) 11a 11b 11c 12 13 14 15 16 🔀 17
Any information copied from such Reports and Stor for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Citibank, F.S.B. Mailing Address 1400 G Street, NW		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Washington	State Zip Code DC 20005	Transaction ID: 12380918
FEC ID number of contributing federal political committee. Name of Employer	C	Amount of Each Receipt this Period 351.77
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 988.07	Bank Interest Received

SUBTOTAL of Receipts This Page (optional)	•	351.77
TOTAL This Period (last page this line number only)	<u> </u>	351.77

TEMIZED DIODUDOEMENTO	Use seperate schedule(s)		heck or	E NONE)	En.		PF	NGE	34 / 60	
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X	-	22 28a	F	23 28b	24 28c	\vdash	25 29	26
Any Information copied from such Reports and State				for the p	ourpo	se of so	olicating c	ontrib	utions	
or for commercial purposes, other than using the na	ame and address of any political co	ommit	tee to s	olicit cor	ıtribu	tions fro	om such o	comm	ittee	
NAME OF COMMITTEE (In Full)										
American Hospital Association PAC										
Full Name (Last, First, Middle Initial)				Trai	nsact	ion ID:	123809	22		
Merchant Bankcard				Date		Disburse		/ · V	V	V
Mailing Address 1601 Elm Street				lo";	3 "	0	6 /	2	0 Ď 6	
City	State Zip Code			Amo	ount o	of Each	Disburse	ement	this P	eriod
Dallas Purpose of Disbursement	TX 75201			-					140.8	8
Bank Fees		00	1		-	-				
Candidate Name		Cate	_							
		Тур	ре							
	rsement For:			Ban	k Fe	es				
Senate President	Primary General Other (specify) ▼									
State: District:	Other (specify)									
Full Name (Last, First, Middle Initial)				Trai	near	ion ID:	123223	21		
Gitibank, F.S.B.						Disburse		1		
Mailing Address 1400 G Street, NW				0 ^M ;	3 M	/ D 1	D / Y	ź	0 0 6	Y
Mailing Address 1400 G Street, NW										
City Washington	State Zip Code DC 20005			Amo	ount o	of Each	Disburse	ement	this P	eriod
Purpose of Disbursement									325.6	5
Federal Tax Payment		00	1							
Candidate Name		Cate								
Office Sought: House Disbu	rsement For:	Тур	ре	_						
Senate	Primary General			Fed	eral	Tax Pa	ayment			
President	Other (specify)									
State: District:										
Full Name (Last, First, Middle Initial) Citibank, F.S.B.							123809	20		
Citibank, F.S.B.				_ Date	Of L	Disburse / D	ement	/ · v		V
Mailing Address 1400 G Street, NW				o";	3 "	2	Ŏ Í	2	0 Ď 6	
City	State Zip Code			Amo	ount o	of Each	Disburse	ement	this P	eriod
Washington Purpose of Disbursement	DC 20005			$+ \sqcap$					133.3	6
Bank Fee		00	1		_			-		
Candidate Name	7	Cateo	gory/							
Office Sought: House Disbu	rsement For:	· yh		┥_	_					
Senate	Primary General			Ban	k Fe	е				
President	Other (specify) ▼									
State: District:										
SUBTOTAL of Disbursements This Page (optional	al)		>					10	99.8	9
								10	99.8	0
TOTAL This Period (last page this line number or	IV)							10	JJ.0	.

		Use seperate schedule(s)	- 	check or	ly one)					E 35/			
ITEMIZED DISBURSEMENTS		for each category of the Detailed Summary Page		Ë	21b 27	22 28a	Х	23 28b	П	24 28c	25 29	26 30k		
	Information copied from such Reports and State											าร		
or t	or commercial purposes, other than using the na	ne and address of any politica	ll com	ım	ittee to s	olicit con	ribut	ions fr	om s	uch con	nmittee			
$ \rangle$	NAME OF COMMITTEE (In Full) American Hospital Association PAC													
L	American Hospital Association FAC													
Α.	Full Name (Last, First, Middle Initial)									43058	}			
۸.	Friends Of John Peterson						М	isburs			YY	Y		
	Mailing Address 114 W. State Street PO Box 295						IWI	() 3 ^D	L.	ž 0 ŏ	6		
	City State Zip Code Pleasantville PA 16341						Amount of Each Disbursement this Period							
	Purpose of Disbursement										1000.	00		
	Contribution 011													
	Candidate Name Rep. John E. Peterson				gory/ pe									
	X	ement For: 2006 Primary General Other (specify)				Contribution								
	Full Name (Last, First, Middle Initial)					T	-	· ID	101	40050				
_								isburs	emer			V		
	Mailing Address 147 N Meramec Suite 100							´ L ˙ (3	Ĺ.	žoŏ	6		
	City St Louis	State Zip Code MO 63105				Amount of Each Disbursement this Pe								
	Purpose of Disbursement Contribution 011								•	0 1	2000.	00		
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3. Costello For Congress Committee				t ion ID: 1214 Disbursement			
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City Belleville	State Zip Code IL 62222		Amount	of Each Disb	ursement	this Pe	eriod
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Rep. Jerry F. Costello		Category/ Type					
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3. People With Hart Inc				action ID: f Disburse		/4			
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NAME OF COMMITTEE (In Full)			
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C. Friends Of Rahm Emanuel			Transaction ID: 12143060 Date of Disbursement
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NAME OF COMMITTEE (In Full)			
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Full Name (Last, First, Middle Initial) A. Doggett For U.S. Congress			Transaction ID: 12156777 Date of Disbursement
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Candidate Name Rep. Lloyd Doggett		Category/ Type	
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State: TX District: 25 Full Name (Last, First, Middle Initial)			Transaction ID: 12157764
B. Ron Lewis For Congress			Date of Disbursement 0 3
Mailing Address PO Box 307	State Zip Code		
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B. Kuhl For Congress					tion ID: 1: Disbursem	_	v · v ·	V
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NAME OF COMMITTEE (In Full)			
American Hospital Association PAC			
Full Name (Last, First, Middle Initial) A. Lincoln Davis For Congress			Transaction ID: 12176661 Date of Disbursement
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Candidate Name Rep. Lincoln Davis		Category/ Type	
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State: TN District: 4 Full Name (Last, First, Middle Initial)			Transaction ID: 12176659
B. Herseth For Congress			Date of Disbursement
Mailing Address PO Box 2009			03 14 2006
Sioux Falls	State Zip Code SD 57101		Amount of Each Disbursement this Period
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Candidate Name Rep. Stephanie Herseth		Category/ Type	
	ement For: 2006 Primary General Other (specify)		Contribution
State: SD District: 1			
Full Name (Last, First, Middle Initial) C. Schwarz For Congress			Transaction ID: 12176670 Date of Disbursement
Mailing Address Post Office Box 2063			03 14 2006
	State Zip Code MI 49016		Amount of Each Disbursement this Period
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Candidate Name Rep. Joe Schwarz, M.D.		Category/ Type	
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